BEVERLY TERRACE
121 HOSPITAL DRIVI

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WATERTOWN 53098 Phone:	(920) 261-9220) Owner	ship:	C	Corporation			
Operated from 1/1 To 12/31 Days	of Operation:	: 365 Highe	st Level License:	S	killed			
Operate in Conjunction with Hospita	1?	No Opera	te in Conjunction with	CBRF? N	Io			
Number of Beds Set Up and Staffed	(12/31/02):	122 Title	18 (Medicare) Certifie	d? Y	es			
Total Licensed Bed Capacity (12/31/	'02) :	126 Title	19 (Medicaid) Certifie	d? Y	es			
Number of Residents on 12/31/02:		121 Avera	ge Daily Census:	1	18			
*********	******	******	******	******	*******			
Services Provided to Non-Residents	Age, Sea	k, and Primary Diagn	osis of Residents (12/3	1/02)	Length of Stay (12/31/02)			
Home Health Care	No Primary	Diagnosis	% Age Groups	용	Less Than 1 Year			
Supp. Home Care-Personal Care	No				1 - 4 Years			
Supp. Home Care-Household Services	No Developr	mental Disabilities	0.0 Under 65	6.6	More Than 4 Years			
Day Services	No Mental 3	[llness (Org./Psy)	9.1 65 - 74	8.3	1			
Respite Care	Yes Mental 3	Illness (Other)	2.5 75 - 84	25.6				
Adult Day Care	No Alcohol	& Other Drug Abuse	0 0 1 85 - 94	47.9	* * * * * * * * * * * * * * * * * * *			

Home Health Care	No Primary Diagnosis	% Age Groups	용	Less Than 1 Year	49.6
Supp. Home Care-Personal Care	No			1 - 4 Years	33.1
Supp. Home Care-Household Services	No Developmental Disabilitie	s 0.0 Under 65	6.6	More Than 4 Years	17.4
Day Services	No Mental Illness (Org./Psy)	9.1 65 - 74	8.3		
Respite Care	Yes Mental Illness (Other)	2.5 75 - 84	25.6		100.0
Adult Day Care	No Alcohol & Other Drug Abus	e 0.0 85 - 94	47.9	*******	*****
Adult Day Health Care	No Para-, Quadra-, Hemiplegi	c 0.0 95 & Over	11.6	Full-Time Equival	ent
Congregate Meals	No Cancer	1.7		Nursing Staff per 100	Residents
Home Delivered Meals	No Fractures	10.7	100.0	(12/31/02)	
Other Meals	No Cardiovascular	18.2 65 & Over	93.4		
Transportation	No Cerebrovascular	13.2		RNs	9.2
Referral Service	No Diabetes	1.7 Sex	%	LPNs	9.3
Other Services	Yes Respiratory	3.3		Nursing Assistants,	
Provide Day Programming for	Other Medical Conditions	39.7 Male	28.9	Aides, & Orderlies	39.2
Mentally Ill	No	Female	71.1		
Provide Day Programming for		100.0			

		edicare itle 18			edicaid itle 19			Other			Private Pay	;		amily Care]	Managed Care	l		
Level of Care	No.	°	Per Diem (\$)	No.	90	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	& &	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	24	100.0	188	73	92.4	107	0	0.0	0	11	64.7	165	0	0.0	0	1	100.0	250	109	90.1
Intermediate				6	7.6	89	0	0.0	0	6	35.3	165	0	0.0	0	0	0.0	0	12	9.9
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	24	100.0		79	100.0		0	0.0		17	100.0		0	0.0		1	100.0		121	100.0

BEVERLY TERRACE

*******	*****	******	******	*****	******	******	*****					
Admissions, Discharges, and		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02										
Deaths During Reporting Period												
					% Needing		Total					
Percent Admissions from:		Activities of	%	As	sistance of	2	Number of					
Private Home/No Home Health	8.3	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents					
Private Home/With Home Health	0.8	Bathing	1.7		93.4	5.0	121					
Other Nursing Homes	3.0	Dressing	9.9		59.5	30.6	121					
Acute Care Hospitals	82.7	Transferring	25.6		56.2	18.2	121					
Psych. HospMR/DD Facilities	0.0	Toilet Use	24.0		63.6	12.4	121					
Rehabilitation Hospitals	2.3	Eating	42.1		45.5	12.4	121					
Other Locations	3.0	* * * * * * * * * * * * * * * * * * *	*****	*****	******	******	*****					
Total Number of Admissions	133	Continence		용	Special Treat	ments	8					
Percent Discharges To:		Indwelling Or Extern	nal Catheter	9.9	Receiving R	espiratory Care	12.4					
Private Home/No Home Health	7.9	Occ/Freq. Incontiner	nt of Bladder	58.7	Receiving T	racheostomy Care	0.0					
Private Home/With Home Health	15.9	Occ/Freq. Incontiner	nt of Bowel	38.8	Receiving S	uctioning	0.0					
Other Nursing Homes	7.9				Receiving O	stomy Care	1.7					
Acute Care Hospitals	14.3	Mobility			Receiving T	ube Feeding	0.8					
Psych. HospMR/DD Facilities	0.8	Physically Restraine	ed	0.8	Receiving M	echanically Altered Diets	34.7					
Rehabilitation Hospitals	0.0	1										
Other Locations	11.9	Skin Care			Other Residen	t Characteristics						
Deaths	41.3	With Pressure Sores		2.5	Have Advanc	e Directives	100.0					
Total Number of Discharges		With Rashes		9.9	Medications							
(Including Deaths)	126				Receiving P	sychoactive Drugs	32.2					
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Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

		Owne	ership:	Bed	Size:	Lic	ensure:				
	This	Prop	prietary	100	-199	Ski	lled	Al	1		
	Facility	acility Peer Group		Peer	Group	Peer	Group	Faci	lities		
	ଚ	%	Ratio	90	Ratio	%	Ratio	90	Ratio		
Occupancy Rate: Average Daily Census/Licensed Beds	92.9	85.1	1.09	85.5	1.09	86.7	1.07	85.1	1.09		
Current Residents from In-County	22.3	75.4	0.30	78.5	0.28	69.3	0.32	76.6	0.29		
Admissions from In-County, Still Residing	11.3	20.1	0.56	24.7	0.46	22.5	0.50	20.3	0.56		
Admissions/Average Daily Census	112.7	138.3	0.81	114.6	0.98	102.9	1.10	133.4	0.85		
Discharges/Average Daily Census	106.8	139.7	0.76	114.9	0.93	105.2	1.01	135.3	0.79		
Discharges To Private Residence/Average Daily Census	25.4	57.6	0.44	47.9	0.53	40.9	0.62	56.6	0.45		
Residents Receiving Skilled Care	90.1	94.3	0.96	94.9	0.95	91.6	0.98	86.3	1.04		
Residents Aged 65 and Older	93.4	95.0	0.98	94.1	0.99	93.6	1.00	87.7	1.07		
Title 19 (Medicaid) Funded Residents	65.3	64.9	1.01	66.1	0.99	69.0	0.95	67.5	0.97		
Private Pay Funded Residents	14.0	20.4	0.69	21.5	0.65	21.2	0.66	21.0	0.67		
Developmentally Disabled Residents	0.0	0.8	0.00	0.6	0.00	0.6	0.00	7.1	0.00		
Mentally Ill Residents	11.6	30.3	0.38	36.8	0.31	37.8	0.31	33.3	0.35		
General Medical Service Residents	39.7	23.6	1.68	22.8	1.74	22.3	1.78	20.5	1.94		
Impaired ADL (Mean)	47.8	48.6	0.98	49.1	0.97	47.5	1.00	49.3	0.97		
Psychological Problems	32.2	55.2	0.58	53.4	0.60	56.9	0.57	54.0	0.60		
Nursing Care Required (Mean)	7.7	6.6	1.17	6.8	1.13	6.8	1.14	7.2	1.08		
narsing care negative (mean)	/ • /	0.0	⊥•⊥/	0.0	T • T J	0.0	T • T 4	1 . 2	1.00		